

## Nosebleeds (Epistaxis) Handout

### What causes a nosebleed?

Most nosebleeds (epistaxis) are relatively minor and will stop in just a few minutes. However, some are quite frightening, and a few are even life threatening. Nosebleeds are classified into two different types.

- Anterior nosebleed: Most nosebleeds begin in the lower part of the septum, the semi-rigid wall that separates the two nostrils of the nose. The septum contains blood vessels that can be broken by a blow to the nose or the edge of a sharp fingernail, or simply from excessive nasal dryness. This type of nosebleed comes from the front of the nose and begins with a flow of blood out one nostril when the patient is sitting or standing.
- Posterior nosebleed: More rarely, a nosebleed can begin high and deep within the nose and flow down the back of the mouth and throat even if the patient is sitting or standing.

### Which type of nosebleed did I have?

It can be very difficult to tell the difference between an anterior (front of nasal cavity) nosebleed versus a posterior nosebleed. A posterior nosebleed generally is more severe and will not respond to pressure on the nose.

It is important to try to make the distinction since posterior (back of nasal cavity) nosebleeds are often more severe and almost always require a doctor's care. Posterior nosebleeds are more likely to occur in older people, persons with high blood pressure, and in cases of injury to the nose or face.

Anterior nosebleeds are common in dry climates or during the winter months when heated, dry indoor air dehydrates the nasal membranes. Dryness may result in crusting, cracking, and bleeding. This can be prevented if you place a bit of lubricating cream or ointment and saline nasal spray to moisturize the nasal passages.

### To Stop an Anterior Nosebleed

If you or your child has an anterior nosebleed, you may be able to care for it yourself using the following steps: First, try to stay calm, especially for a young child. A person who is agitated may bleed more profusely than someone who has been reassured and supported. Then:

- Pinch all the soft parts of the nose together between your thumb and the side of your index finger **OR** Soak a cotton ball with Afrin® nasal spray, and place it into the nostril.
- Press firmly but gently with your thumb and the side of your index finger toward the face, compressing the pinched parts of the nose against the bones of the face.
- Hold that position for a full 5 minutes.
- Keep head higher than the level of the heart. Sit up or lean forward with the head elevated.
- Apply ice; crushed in a plastic bag or washcloth, to nose and cheeks.

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### **What are my treatment options?**

Many doctors suggest any of the following lubricating creams or sprays. They can all be purchased without prescription: Aquaphor®, Eucerin®, Vaseline®, Ocean Spray (pharmacy brand, Ayr®, NeilMed®). Up to 3 applications a day may be needed, but usually every night at bedtime is enough.

If the nosebleeds persist, you should see your doctor. Using an endoscope your doctor may find a problem within the nose that can be fixed. He or she may recommend cauterization (sealing) of the blood vessel that is causing the trouble.

### **What about re-bleeding?**

#### **To prevent re-bleeding after initial bleeding has stopped:**

- Do not pick or blow nose.
- Do not strain or bend down to lift anything heavy.
- Keep head higher than the heart.
- Use a humidifier during dry winter months.

#### **If re-bleeding occurs:**

- Attempt to clear nose of all blood clots.
- Spray nose four times in the bleeding nostril(s) with a decongestant spray such as Afrin or Neo-Synephrine®.
- Perform steps 1 and 2 shown in the “To stop an anterior nosebleed”. Repeat these steps as necessary.
- Call your doctor or seek medical attention if bleeding persists.